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Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING		(X3) DATE SURVEY COMPLETED	
NVN651HOS				B. WING		03/05/2009	
NAME OF PROVIDER OR SUPPLIER S			STREET ADD	RESS, CITY, STA	ATE, ZIP CODE		
MT CDANT CENEDAL LICEDITAL			_	HORNE, NV 89415			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)			ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETE DATE
S 000 Initial Comments			S 000				
	This Statement of Deficiencies was generated as a result of the State Licensure survey conducted at your facility on 3/2/09 through 3/5/09. The survey was conducted using the authority of NAC 449, Hospitals.						
	by the Health Division prohibiting any crimin actions or other claim	clusions of any investign shall not be construed all or civil investigations as for relief that may be under applicable fede	d as s,				
	The following regulatory deficiencies were identified:						
S 175 SS=I	NAC 449.338 Dietary Services		S 175				
	food, a hospital shall:		_				
		standards prescribed in and the regulations add					
	Based on observation review, the facility did nutritional needs of in						
		evada Revised Statues					
	Findings include:						
	An inspection of the f procured the following	acility's kitchen on 3/2/g findings:	09				
	with an "expiration" (d	rated foods were mark discard) date rather tha or preparation, as requin	n with				

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Bureau of Health Care Quality & Compliance STATEMENT OF DEFICIENCIES (X3) DATE SURVEY (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION COMPLETED IDENTIFICATION NUMBER: A. BUILDING B. WING NVN651HOS 03/05/2009 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER **FIRST AND A STREETS** MT GRANT GENERAL HOSPITAL HAWTHORNE, NV 89415 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID ID (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX **PREFIX** DATE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) S 175 S 175 Continued From page 1 state food service regulations. The cook stated that the kitchen had recently implemented this date marking system with "expiration" dates at the request of the facility's risk manager. In the two-door refrigerator there were opened containers of cottage cheese and sour cream which had not been dated. In the three-door refrigerator a turkey/egg salad was undated. In the dry storage room a pan of baked bread was undated. The dietary manager stated that these items were supposed to have been dated. The facility's policy included the following statements: "All leftovers...are marked with the name of the item and dated when prepared. Hazardous foods will be stored for a maximum of 72 hours from the preparation time." Food storage: In the walk-in refrigerator it was observed that ham, deli meats, and hot dogs were being stored on the same shelf as raw beef and raw chicken. There was no written policy pertaining to the appropriate storage of refrigerated foods. Food temperatures: An infrared thermometer was observed in the kitchen. The cook stated that a stem thermometer was available, but that the infrared thermometer had been the primary thermometer used in the kitchen for the past five years. He further reported that the use of the infrared thermometer was not always reliable in that when some items such as soups were stirred, there could be different temperature readings. A review of the food temperature log for the month of February revealed that temperatures had been taken for seven days. Food temperatures had not been periodically checked when delivered to patients per facility policy. The dietary manager could not explain

why food temperatures had not been regularly

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been using it "for a while." The kitchen's written

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